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APPLICANTS

Terence Sean Sullivan, Brookline, MA;

David S. Holbrook, Lexington, MA;
Clifford A. Lardin, Ithaca, NY;**** CONTINUING DATA ********EN none***** FOREIGN APPLICATIONS ********EN none***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 18	TOTAL CLAIMS 72	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Not after Allowance				
Verified and Acknowledged	<i>line</i>	Examiner's Signature	Initials		

ADDRESS

Gary L. Loser
 Varian Semiconductor Equipment Associates, Inc.
 35 Dory Road
 Gloucester , MA
 01930

TITLE

Method and apparatus for tuning ion implanters

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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